

remains to be decided by statistics whether the vaccine virus is less active and less preservative in its influence in the moist climates of the south of Europe, than in the drier ones of the north.—*Month. Journ.*, Nov., from *L'Union Médicale*, Oct. 5th, 1848.

31. *On the Employment of Nitrate of Potass in Acute Rheumatism ; with Suggestions for the Use of Saline Solutions as External Applications in Local Rheumatic Inflammation.* By W. R. BASHAM, M.D. (Proceedings of Royal Med. and Chirurg. Soc., Nov. 14.)—The author takes, as the basis of his essay, the following facts: 1st, that in acute rheumatism, as in other inflammatory diseases, the most important changes in the composition of the blood are the increased quantity of fibrine, and the deficiency of the saline ingredients; 2d, that where this state of the blood exists there is a special disposition to the deposit of fibrine, and the formation of adventitious tissues; while in diseases in which the fibrine is deficient, and the salts in excess in the blood, the blood does not coagulate, and hemorrhages of a passive character occur; and 3d, that although, as his own experiments have satisfied him, saline solutions have not the power of dissolving coagulated fibrine, yet certain salts in solution, mixed with the blood at the moment of its escape from the body, possess the property of suspending or retarding the separation of the fibrine. He next inquires whether any therapeutic principle can be derived from these facts, and proposes the question, whether saline remedies, largely employed, may not suppress the tendency to the fibrinous exudation, or retard it, so as to give time for other remedies to diminish the proportion of fibrine present in the blood. With reference to this question, he alludes to the observations of several physicians on the use of nitrate of potash in acute rheumatism, and details his own experience of its effects. He gives one, two, or three ounces of nitrate of potass, largely diluted, (in two quarts of water,) in the twenty-four hours. In the majority of cases no obvious effect is produced on the force or frequency of the pulse, the digestive functions, or the quantity of urine exuded. But the urine always acquires a high specific gravity, and nitrate of potass may be detected in it. The swelling, heat, and pain of the joints affected with rheumatism are relieved in a most marked degree, even when no other remedies are employed at the same time. There is a certain amount of exemption from cardiac complication; and cardiac inflammation, when present, is more amenable to remedies. In a case which the author relates, he examined the blood of the patient before the commencement of the saline treatment, and again after this treatment had been continued for some days. In the first instance it was buffed and cupped, the fibrine was in excess, and the salts were deficient. After the administration of the nitre there was no buffy coat, the proportion of fibrine had diminished, and that of the salts greatly increased. The author presumes, therefore, that while the internal use of the nitrate of potass assisted to restore the proportion of the saline constituents, the other treatment employed tended to lessen the excess of fibrine. Some remarks of Mr. Gulliver have led the author to investigate the effects of the external application of saline matters to parts affected with rheumatism. His experiments have been principally made with nitrate of potass. In chronic rheumatism he has used the iodide of potassium, and in gout the bibasic phosphate of soda. He applies the saline substance by means of the spongio-piline, a portion of which, large enough to envelop the part affected, having been moistened with water, the salt employed is sprinkled in powder freely on the spongy surface: it is then applied to the part, and secured with a roller. In numberless instances, by this simple treatment, he has witnessed the most palpable and instant relief to the local inflammation. Constitutional remedies were employed at the same time, but the relief was proved to be due to the saline applications, by the fact, that where several joints were affected, only those were relieved to which the salt was applied. At the end of the paper the author gives an abstract of seventy-nine cases of acute rheumatism, showing the results of treatment, and other particulars.

Dr. Henry Bennet had witnessed the results of a similar mode of treatment to that practised by Dr. Basham, in Paris, in 1837, and subsequently. In that year, M. Gendrin had instituted a series of experiments with the nitrate of potash, in acute rheumatism. He gave it in doses varying from six to twelve drachms. He had seen this treatment adopted in about as many cases as were recorded in the

paper before them, and with the same result. It was found to be a safe, powerful, and energetic remedy. In the experiments of M. Gendrin, no other medicine was given, not even aperients. The result of the treatment was generally successful, but in every tenth or twelfth case it was found necessary to resort to the old remedies, bleeding, calomel, and opium, &c. It was noticed, also, that patients treated with the nitrate of potash were unusually free from cardiac disease, more so, indeed, than when any other kind of treatment was adopted. Another noticeable circumstance connected with this mode of treatment was, that patients recovered more rapidly from the disease than when any other plan was pursued. This was most important, particularly in Paris, where bleeding was often resorted to, to a considerable extent, and patients were consequently kept months, and even years, in a weakly condition. He had never seen any injurious effects from the large doses given. This, no doubt, was owing to the large quantity of fluid in which the medicine was dissolved. In all cases of poisoning by this agent, recorded in works on medical jurisprudence, the quantity of fluid used was small. He (Dr. Bennet) had recorded some cases treated by this medicine, in the *Lancet* of 1845. The plan pursued was perfectly original, and the originality was due to Dr. Basham. In slight rheumatic cases, in which there was little febrile action, this treatment was most beneficial, the patients recovering in four or five days.

Dr. Basham said, that in only two cases had he treated the disease by nitrate of potash alone. The acute, inflammatory symptoms usually gave way on the third or fourth day; and it was important to state, that in no one case treated by the nitrate of potash had there been any relapse. This was a strong recommendation of the value of the treatment, when we recollected how common relapses were, when the other modes of treatment were employed. In the first instance, he had given as much as four ounces of the salt in the twenty-four hours, but he had now reduced the quantity to one or two ounces in that period. A great quantity of the salt escaped by the urine, the quantity of which was not much increased, but its specific gravity was a great deal higher, averaging between 1030 and 1040. This increase in the specific gravity he considered was due to the potash.—*Lancet*, Nov. 25, 1848.

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32. *Collodion in the Treatment of Diseases of the Skin*.—By ERASMUS WILSON, Esq. (*Lancet*, Nov. 18, 1848.)—The author first employed this article in a case of scrofulous ulceration of the skin, and from careful observation of its effects in that case found it to possess four important properties, viz.

First. That of a mild stimulant.

Second. That of an efficient substitute for the natural scarf-skin.

Third. That of a mechanical compress.

Fourth. That of an adhesive glue, from which quality it derives its name.

First. As a mild stimulant, it is fitted to exert a local alterative action on the congested capillaries of a chronic ulceration, and give activity to the healing process.

Second. In its character of a substitute for the absent scarf-skin, it is transparent, pliant, and more or less impermeable, according to the thickness of the layer that may seem to be required.

Third. Its most remarkable property, as it seems to me, is the contraction which occurs during the dessication of the collodion, and which produces a local pressure of considerable power on the surface to which it is applied. Thus, in the case above related, the congestion of the thickened skin was relieved by the varnish-like film of collodion spread upon its surface, by means of a camel-hair brush, as completely as if a nicely-adjusted bandage had been placed over it. In another instance, I found a film of collodion entirely remove a purple congestion (resulting from imperfect circulation) from the tip of the nose, in a lady who had long suffered from the annoyance. In a third case, in which the fingers of an elderly lady were congested and blue, and the congestion was attended by pain and throbbing, like that which accompanies chilblains, the collodion produced so much contraction as to render their tips white and bloodless, and I was obliged to discontinue the application in consequence.

Fourthly. The glue-like property of the collodion is evinced in its adhesion of cut surfaces, a property which is much increased by the contraction above men-